

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

12 JUL 17 PM 1:42

Office Use Only

FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Bob Massie for U.S. Senate

ADDRESS (number and street)

140 Sycamore Street



Check if different than previously reported. (ACC)

Somerville

MA

02145

2. FEC IDENTIFICATION NUMBER ▼

C C00492561

3. IS THIS REPORT



NEW (N) OR



AMENDED (A)

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

MA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
04 / 01 / 2012

through

M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shelley J Alpern

Signature of Treasurer Shelley J Alpern

Date

M M / D D / Y Y Y Y Y Y
07 / 11 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

12020524051